

MAY 11 2000

K 001272

**Special 510(k) - Device Modification  
Summary of Safety and Effectiveness for the  
Xia II Polyaxial Screw**

**Submission Information**

**Name and Address of the Sponsor  
of the 510(k) Submission:**

Howmedica Osteonics Corp.  
59 Route 17  
Allendale, NJ 07401-1677

**Contact Person:**

Mary-Catherine Dillon  
Regulatory Affairs Specialist

**Date of Summary Preparation:**

April 12, 2000

**Device Identification**

**Proprietary Name:**

Xia Spine System

**Common Name:**

Spinal Fixation Appliances

**Classification Name and Reference:**

Spinal Interlaminar Fixation Orthosis  
21 CFR §888.3050

**Predicate Device Identification**

The features of the Xia II Polyaxial (PA) Screw are substantially equivalent to features of the Xia Spine System Polyaxial Screw, which has been cleared for marketing via the 510(k) process (K984251).

**Device Description**

The subject screws are available in 5.5mm, 6.5mm and 7.5mm diameters and vary in length from 30mm to 60mm (in 5mm increments). The top portion of the screw is threaded. They are manufactured from either titanium alloy (Ti-6Al-4V) per ASTM F-136 or CP Titanium per ASTM F-67. The Xia II PA Screw head can rotate. The taper lock is applied directly on the screw. The rod, therefore, contacts the bone screw head.

**Intended Use:**

The Xia II Polyaxial Screws are intended to be used as part of the Xia Spine System.

**Indications For Use:**

The XIA Spine System is intended for use in the noncervical spine. When used as a pedicle screw fixation system, the XIA Spine System is intended for patients: (a) having severe spondylolisthesis (Grades 3 and 4) at the fifth lumbar - first sacral (L5-S1) vertebral joint; (b) who are receiving fusions using autogenous bone graft only; (c) who are having the device fixed or attached to the lumbar and sacral spine; and (d) who are having the device removed after the development of a solid fusion mass.

When used as a pedicle screw fixation system, the XIA Spine System is also intended to provide immobilization and stabilization of spinal segments in skeletally mature patients as an adjunct to fusion in the treatment of the following acute and chronic instabilities or deformities of the thoracic, lumbar, and sacral spine: degenerative spondylolisthesis with objective evidence of neurologic impairment, fracture, dislocation, scoliosis, kyphosis, spinal tumor, and failed previous fusion (pseudarthrosis).

When used as an anterior screw fixation system or a posterior hook and sacral/iliac screw fixation system, the XIA Spine System is indicated for patients with degenerative disc disease which is defined as back pain of discogenic origin with degeneration of the disc confirmed by history and radiographic studies, spondylolisthesis, fracture, spinal stenosis, spinal deformities such as scoliosis, kyphosis, lordosis, tumor, pseudoarthrosis or revision of failed fusion attempts.

**Statement of Technological Comparison:**

The Xia II Polyaxial Screw shares the same material, intended use, and basic design concepts as that of the predicate Xia Spine System Polyaxial Screw. Fatigue and static testing demonstrates the comparable mechanical and endurance properties of these components.



DEPARTMENT OF HEALTH & HUMAN SERVICES

Public Health Service

MAY 11 2000

Food and Drug Administration  
9200 Corporate Boulevard  
Rockville MD 20850

Ms. Elizabeth A. Staub  
Vice President, Quality Assurance/Regulatory Affairs/Clinical Research  
Howmedica Osteonics Corporation  
59 Route 17  
Allendale, New Jersey 07401-1677

Re: K001272  
Trade Name: Xia II Polyaxial Screws to be used with the Xia Spine System  
Regulatory Class: II  
Product Code: KWQ, KWP, MNH and MNI  
Dated: April 7, 2000  
Received: April 20, 2000

Dear Ms. Staub:

We have reviewed your Section 510(k) notification of intent to market the device referenced above and we have determined the device is substantially equivalent (for the indications for use stated in the enclosure) to devices marketed in interstate commerce prior to May 28, 1976, the enactment date of the Medical Device Amendments, or to devices that have been reclassified in accordance with the provisions of the Federal Food, Drug, and Cosmetic Act (Act). You may, therefore, market the device, subject to the general control provisions of the Act. The general control provisions of the Act include requirements for annual registration, listing of devices, good manufacturing practice, labeling, and prohibitions against misbranding and adulteration.

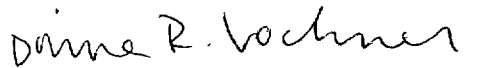
If your device is classified (see above) into either class II (Special Controls) or class III (Premarket Approval), it may be subject to such additional controls. Existing major regulations affecting your device can be found in the Code of Federal Regulations, Title 21, Parts 800 to 895. A substantially equivalent determination assumes compliance with the current Good Manufacturing Practice requirement, as set forth in the Quality System Regulation (QS) for Medical Devices: General regulation (21 CFR Part 820) and that, through periodic (QS) inspections, the Food and Drug Administration (FDA) will verify such assumptions. Failure to comply with the GMP regulation may result in regulatory action. In addition, FDA may publish further announcements concerning your device in the Federal Register. Please note: this response to your premarket notification submission does not affect any obligation you might have under sections 531 through 542 of the Act for devices under the Electronic Product Radiation Control provisions, or other Federal laws or regulations.


This letter will allow you to begin marketing your device as described in your 510(k) premarket notification. The FDA finding of substantial equivalence of your device to a legally marketed predicate device results in a classification for your device and thus, permits your device to proceed to the market.

Page 2 - Ms. Elizabeth A. Staub

If you desire specific advice for your device on our labeling regulation (21 CFR Part 801 and additionally 809.10 for in vitro diagnostic devices), please contact the Office of Compliance at (301) 594-4659. Additionally, for questions on the promotion and advertising of your device, please contact the Office of Compliance at (301) 594-4639. Also, please note the regulation entitled, "Misbranding by reference to premarket notification" (21 CFR 807.97). Other general information on your responsibilities under the Act may be obtained from the Division of Small Manufacturers Assistance at its toll-free number (800) 638-2041 or at (301) 443-6597, or at its Internet address "<http://www.fda.gov/cdrh/dsmamain.html>".

Sincerely yours,



 Celia M. Witten, Ph.D., M.D.  
Director  
Division of General, Restorative and  
Neurological Devices  
Office of Device Evaluation  
Center for Devices and  
Radiological Health

Enclosure

510(k) Number (if known): K001272Device Name: Xia II Polyaxial Screws, Xia Spinal System

The Xia II Polyaxial Screws are intended to be used as part of the Xia Spine System.

## Indications For Use:

The XIA Spine System is intended for use in the noncervical spine. When used as a pedicle screw fixation system, the XIA Spine System is intended for patients: (a) having severe spondylolisthesis (Grades 3 and 4) at the fifth lumbar - first sacral (L5-S1) vertebral joint; (b) who are receiving fusions using autogenous bone graft only; (c) who are having the device fixed or attached to the lumbar and sacral spine; and (d) who are having the device removed after the development of a solid fusion mass.

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(PLEASE DO NOT WRITE BELOW THIS LINE-CONTINUE ON ANOTHER PAGE IF NEEDED)

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Concurrence of CDRH, Office of Device Evaluation (ODE)

Danne R. Vachner  
(Division Sign-Off)

Division of General Restorative Devices

510(k) Number K001272

Prescription Use ✓

OR

Over-The-Counter Use \_\_\_\_\_ (Per 21 CFR 801.109)  
(Optional Format 1-2-96)